



## BEHAVIORAL HEALTH SERVICE EXPANSION PROGRESS UPDATE

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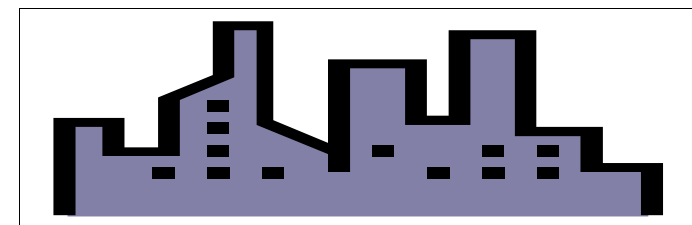
*This newsletter publication is produced by the Office of Mental Health, Substance Abuse and Addiction Services of the Nebraska Department of Health and Human Services.*

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## A NEW ERA FOR BEHAVIORAL HEALTH – LB 692

The 2001 Legislature and the Johanns Administration took decisive action this year to upgrade the availability of mental health and substance abuse and addiction services in Nebraska. More than \$9.5 million in Tobacco Settlement Funds were appropriated to expanding and enhancing behavioral health services around Nebraska.

Driving this action was a backlog of movement into and out of the Regional Centers and a lack of capacity in local communities to provide services to meet the need. The result was spiraling number of "Post Commitment Days" (days individuals spent sitting in hospitals waiting for an opening to the regional center after being committed). Other issues, like commitment of individuals with primary substance



abuse treatment needs, and communities lack of resources to respond to behavioral health needs before they reached crisis level were also cited.

In making the Tobacco Funds available Governor Johanns and the legislature established some priority outcome expectations. Process expectations to assure fairness in distribution of the funds were also identified. Those priorities became the blueprint for the Division and the Regions in responding

to LB 692. Key expectations are:

- ⇒ Eliminate Post-commitment days waiting for regional center placement
- ⇒ Decrease number of Emergency Protective Custody cases
- ⇒ Decrease number of commitments to regional centers for substance abuse treatment
- ⇒ Equitable availability of services in all counties.

## SERVICE EXPANSION NOW UNDERWAY

Overall, services for an estimated (3,000 to 3,500) additional Nebraskans with mental illness and/or substance abuse recovery needs will be added in 2002.

All six regions are expanding emergency services to provide earlier and less restrictive intervention to individuals in crisis. These services will reduce the need for Emergency Protective Custody, and decrease commitments and post

commitment days.

Community support capacity (estimated 360 individuals) is also expanding statewide.

Four regions are adding Short Term Residential beds for persons needing substance abuse treatment, with capability of serving an estimated 216 individuals.

Three regions are adding Day Rehabilitation Service Capacity

for people with severe and persistent mental illness, with capacity to serve more than 100 additional people.

Three regions are adding Intensive Outpatient Capacity for substance abuse. An estimated 160 additional individuals will be served in this program.

Sixty to seventy thousand additional outpatient hours will be added, including the Region VI Urgent Outpatient Services.

## REGION I WESTERN PANHANDLE



Region I was allocated \$225,000. The region, serving the western Nebraska Panhandle, serves the smallest percentage of the state's population. Two rounds of bids were completed to identify Region I providers. Input was received from consumer groups, provider groups, Advisory Committee, and Governing Board blended with the priorities set by the Governor.

### Service Provided Agency

Community Support,	Northern area Southern area	Western Community Health Resources Panhandle Mental Health Center
Crisis Response Teams/Emergency southern area lower Central upper central area	Service Coordination	In Touch Counseling Region I Regional West Medical Center BBGH

## REGION II NORTH PLATTE

After talking with the referral sources to the current contractors, Region II determined that by adding six substance abuse beds there could be a significant reduction in the wait time and thus make the possibility of success in treatment even greater. A high priority need for providers in Region II is access to care for women that addresses their particular needs and that can allow moms to take their children with them

### Service Provided/Agency

Short Term Residential - SA	St . Monica's
Client Centered Support, persons in Assisted Living and Respite Care	Pawnee Hotel
Coordinated Emergency Support for Behavioral Health:	Richard Young Hospital

## REGION III SANDHILLS KEARNEY & GRAND ISLAND

### Services to be Provided in Region III

#### Mental Health

Day Rehabilitation:	Central Nebraska Goodwill Industries
Community Support	1. Central Nebraska Goodwill Industries, and 2. South Central Behavioral Services
Crisis Intervention/Adams, Buffalo & Hall ,	Provider not yet determined
Emergency & Civil Protective Custody	

#### Substance Abuse

Short Term Residential	1. St. Francis Alcohol & Drug Treatment Center 2. Behavioral Health Specialists/Seekers of Serenity
Community Support:	Central Nebraska Goodwill Industries
Intensive Outpatient:	1. St. Francis Alcohol & Drug Treatment Center 2.. South Central Behavioral Services
Outpatient (increased capacity/ Drug Court)	1. St. Francis Alcohol & Drug Treatment Center 2. South Central Behavioral Services

## REGION IV NORTH CENTRAL & NORTH EAST NORFOLK & COLUMBUS

Priority for service expansion in Region IV was determined through community meetings, Advisory Committee input, and Provider meetings from January 2000 – June 2001.. Identified needs were prioritized and services were chosen based upon having a significant impact on problem areas as identified in legislative and gubernatorial targeted priorities and goals ,(i.e. post commitment days, provision of services most likely to help consumers transition into the community.)

### Service to be Provided

Community Support/MH	Sandhills Mental Health Ctr	Detox	BHS – SOS Place
Day Rehab	Sandhills	Dual Disorder	W.E.L.L. Link
Community Support/SA	Sandhills & Behavioral Health Services (BHS)	CADAC Assessment- Criminal Justice	To Be Determined
Short Term Residential/ SA	BHS –Seekers Of Serenity (SOS Place)	Crisis Management	Rainbow Center

## REGION V SOUTHEAST NEBRASKA & LINCOLN AREA

The total new funds allocated to Region V was \$2,256,193.

Planning groups were used to determine service needs, involving consumers, providers, Behavioral Health Advisory Committee members, and Regional Governing Board members, with emphasis on meeting the priorities established by the Governor, Legislature, and Department of Health and Human Services and using the six-year plan previously developed. Services to be provided in Region V are as follows:

### Service to be Provided

Intermediate Residential/ Substance Abuse  
Community Support - Mental Health/ Urban

Outpatient/ MH & Substance Abuse - Urban

Outpatient/ MH & Substance Abuse - Rural

Short Term Residential - Substance Abuse

Emergency Protective Custody

Vocational Support - Mental Health

Halfway House Males/ Substance Abuse

Intensive Outpatient Urban Substance Abuse/Drug Court

Cornhusker Place

1. CenterPointe

2. Community Mental Health Center

1. Community Mental Health Center

2. Family Service

Lutheran Family Services

St. Monica's

Cornhusker Place

Community Mental Health Ctr.

Houses of Hope

Lutheran Family Services

Providers for the following services are still to be determined: Community Support MH Rural, Outpatient Mental Health/Substance Abuse Rural, Short-Term Residential/Substance Abuse, Intensive Care Management/Mental Health & Substance Abuse, Intensive Outpatient Substance Abuse Drug Court/ Urban, Short-Term Respite/ Mental Health & Substance Abuse, Bi-Lingual/Cultural Service Coordination, Dual Disorder Residential - Mental Health & Substance Abuse

## REGION VI OMAHA METRO AREA & SURROUNDING COUNTIES

The Omaha – Region VI area represents more than 35% of the state's population in just five counties. It is Nebraska's most urban area.

Not surprisingly,, the problems with the emergency funding first surfaced in Omaha. The region went to the legislature for emergency funding in 2000 and again in 2001.

Region VI was also the first to begin looking at system issues and the need to redesign the flow of services to better serve indigent individuals.

Region VI has identified the following services to address the strategies:

- Urgent Outpatient and Urgent Medication Management to assure a person in crisis is seen within 24 hours is being put in place to prevent continued deterioration and emergency hospitalization. Lutheran Family Services will be the provider.
- Additional Substance Abuse Intensive Outpatient to increase available non residential treatment for substance abusers as an alternative to residential commitment.

These services will also be provided by Lutheran Family Services.

- Social Detox has been enhanced to allow for more people, including those with minor medical needs to be served. Campus of Hope (Catholic Charities) will be the provider.
- Additional Community Support services for individuals living in the community with severe and persistent mental illness.
- Additional Day Rehabilitation services will be offered at the residential sites established for the former residents of the Paxton.
- A new Crisis Center program for residential short term stabilization of individuals in crisis without hospitalization.

Community Support, Day Rehabilitation, and Crisis Center services are still in bid/contract process.



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## ACCOMPLISHMENTS & NEXT STEPS

In the first six month of Fiscal Year 2002 significant strides were made in strengthening and expanding services for Nebraskans.

The implementation of LB 692 and the distribution of Tobacco Settlement Funds to expand services were the major focus. That effort is well underway around most of the state. Most of the new services have already begun. More will begin over the next three months.

Time spent by Division staff, Regional Administration staff, and providers to put plans in place, complete the bid process, and negotiate contracts, while massive, has laid a foundation for the largest service expansion effort in Nebraska Behavioral Health in many years.

In addition to the funding distribution, efforts have been initiated by the Division to address other potential barriers to the Strategies.

- A workgroup of Regional Center CEO's and community Regional Program Administrators has been mapping out plans to improve the transition from community to regional center hospitalization and back to the community.

- An additional 7.5% rate increase for providers was included in LB 692 and has been completed.
- A formula based on the combined geographic distribution and income level was developed with participation from the Regions, and has been implemented to assure equitable distribution of funds and service development across the state in the future.

Over the next few months, as the remainder of the new services are put in place, the Division will work with the Regions and Providers to resolve any pitfalls that appear and will monitor the impact of the services on the key strategies.

In the meantime, new challenges are on the horizon. There has been an increased demand for services in recent months, not just in Nebraska, but around the country. The growth is due at least in part to stress related issues resulting from the September 11th terrorist attacks and the economy. The managed care contract is currently up for bid. The economy poses additional challenges to funding services.

The Office of Mental Health, Substance Abuse and Addiction Services will continue to report progress quarterly. Stay tuned.